

General

Title

Ambulatory surgery: percentage of Ambulatory Surgery Center (ASC) admissions with surgical site hair removal with a razor or clippers from the scrotal area, or with clippers or depilatory cream for all other surgical sites.

Source(s)

ASC Quality Collaboration. ASC quality measures: implementation guide. Version 3.2. Saint Petersburg (FL): ASC Quality Collaboration; 2015 Oct. 37 p.

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Process

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the percentage of Ambulatory Surgery Center (ASC) admissions who have appropriate surgical site hair removal with a razor or clippers from the scrotal area, or with clippers or depilatory cream for all other surgical sites.

Rationale

Razors can cause microscopic cuts and nicks to the skin, not visible to the eye. Use of razors prior to surgery increases the incidence of wound infection when compared to clipping, depilatory use or no hair removal at all (Seropian & Reynolds, 1971).

Clinical Practice Guidelines

The Centers for Disease Control and Prevention's (CDC's) guidelines for the prevention of surgical site infection include recommendations which specifically address preoperative hair removal practices. The

CDC guidelines state that providers should not remove hair preoperatively unless the hair at or around the incision site will interfere with the operation. If hair is removed, it should be removed immediately before the operation, and preferably with electric clippers. See the Guideline for Prevention of Surgical Site Infection (Mangram et al., 1999).

The Association of Operating Room Nurses (AORN, 2002) standards of recommended practice are in alignment with this measure.

Evidence for Rationale

ASC Quality Collaboration. ASC quality measures: implementation guide. Version 3.2. Saint Petersburg (FL): ASC Quality Collaboration; 2015 Oct. 37 p.

Association of Operating Room Nurses. Recommended practices for skin preparation of patients. AORN J. 2002 Jan;75(1):184-7. [PubMed](#)

Mangram AJ, Horan TC, Pearson ML, Silver LC, Jarvis WR, Hospital Infection Control Practices Advisory Committee. Guideline for prevention of surgical site infection, 1999. Hospital Infection Control Practices Advisory Committee. Infect Control Hosp Epidemiol. 1999 Apr;20(4):250-78; quiz 279-80. [497 references] [PubMed](#)

Seropian R, Reynolds BM. Wound infections after preoperative depilatory versus razor preparation. Am J Surg. 1971 Mar;121(3):251-4. [PubMed](#)

Primary Health Components

Ambulatory Surgery Center (ASC); surgical site; hair removal

Denominator Description

All Ambulatory Surgery Center (ASC) admissions with surgical site hair removal (see the related "Denominator Inclusions/Exclusions" field)

Numerator Description

Ambulatory Surgery Center (ASC) admissions with surgical site hair removal with a razor or clippers from the scrotal area, or with clippers or depilatory cream from all other surgical sites

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence

A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences

A systematic review of the clinical research literature (e.g., Cochrane Review)

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

The measures included in this implementation guide have been developed using a multi-step process. Each has been vetted with both an internal panel of technical experts and an external panel of individuals and/or organizations with relevant expertise. All of the measures have been pilot tested in Ambulatory Surgery Centers (ASCs) and assessed for validity, feasibility and reliability.

Evidence for Extent of Measure Testing

ASC Quality Collaboration. ASC quality measures: implementation guide. Version 3.2. Saint Petersburg (FL): ASC Quality Collaboration; 2015 Oct. 37 p.

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Ambulatory Procedure/Imaging Center

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Single Health Care Delivery or Public Health Organizations

Statement of Acceptable Minimum Sample Size

Does not apply to this measure

Target Population Age

All ages

Target Population Gender

Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Health and Well-being of Communities

Making Care Safer

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Staying Healthy

IOM Domain

Effectiveness

Safety

Data Collection for the Measure

Case Finding Period

Unspecified

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Encounter

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

All Ambulatory Surgery Center (ASC) admissions* with surgical site hair removal

**Admission*: Completion of registration upon entry into the facility.

Exclusions

ASC admissions who perform their own hair removal

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Ambulatory Surgery Center (ASC) admissions with surgical site hair removal with a razor or clippers from the scrotal area, or with clippers or depilatory cream for all other surgical sites

Exclusions

None

Numerator Search Strategy

Encounter

Data Source

Paper medical record

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

- Sample Data Collection Sheet: Appropriate Surgical Site Hair Removal
- Sample Data Collection Log: Surgical Site Hair Removal

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Rate/Proportion

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Identifying Information

Original Title

Appropriate surgical site hair removal.

Measure Collection Name

Ambulatory Surgery Center (ASC) Quality Measures

Submitter

Ambulatory Surgery Center (ASC) Quality Collaboration - Health Care Quality Collaboration

Developer

Ambulatory Surgery Center (ASC) Quality Collaboration - Health Care Quality Collaboration

Funding Source(s)

Ambulatory Surgery Center (ASC) providers; nursing, physician, and provider associations

Composition of the Group that Developed the Measure

Ambulatory Surgery Center (ASC) providers; nursing, physician, and provider associations; provider accrediting organizations

Financial Disclosures/Other Potential Conflicts of Interest

None

Endorser

National Quality Forum - None

NQF Number

not defined yet

Date of Endorsement

2012 Jan 31

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2015 Oct

Measure Maintenance

Unspecified

Date of Next Anticipated Revision

Unspecified

Measure Status

This is the current release of the measure.

This measure updates a previous version: ASC Quality Collaboration. ASC quality measures: implementation guide. Version 2.0. Ambulatory Surgery Center; 2014 Jan. 32 p.

Measure Availability

Source available from the [Ambulatory Surgery Center \(ASC\) Quality Collaboration Web site](#)

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For more information, contact the ASC Quality Collaboration's Executive Director, Donna Slosburg, at E-mail: donnaslosburg@ascquality.org; Web site: ascquality.org .

NQMC Status

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Production

Source(s)

ASC Quality Collaboration. ASC quality measures: implementation guide. Version 3.2. Saint Petersburg (FL): ASC Quality Collaboration; 2015 Oct. 37 p.

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